POSITION	WT ALS	ID NO.	DATE
FEE DETERMINATION			1.0
O.I.P.E. CLASSIFIER	DW	32	12/18
FORMALITY REVIEW			/
RESPONSE FORMALITY REVIEW	<i>5</i> 5	573	03-30-0

INDEX OF CLAIMS

Rejected	N	Non-elected
Allowed	i	Interference
(Through numeral) Canceled	Α	Appeal
Restricted		Objected

— (Through numera ÷	i) Canceled Restricted	0	Objecte	d
Claim Date	Claim	Date	Claim	Date
Finer	Final Original		Final	
	51		101	
2	52		102	
3	53		103	
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9	59		109	- - - - - - - - - - - - - - - - - - -
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39	89	 	139	╅┼┼┼┼
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50	100		150	

If more than 150 claims or 10 actions staple additional sheet here

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